OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT - OF 612

You may apply for most jobs with a resume, this form, or other written format. If your resume or application does not provide all the information requested on this form and in the job vacancy announcement, you may lose consideration for a job.

1	Job title in announcer	2 Grade(s) applying for		3 Announcement number					
	STUDENT NURSE		N/A			N/A			
4	Last name First and r		First and midd	iddle names		5 Social Security Number			
6	Mailing address					7 Phone numbers (include area code)			
Ĭ						Day	time ()		
	City		State	State ZIP Code					
				-		Eve	ning ()		
W 8	ORK EXPERIENCE Describe your paid and nonpaid work experience related to the job for which you are applying. Do not attach job descriptions. Job title (if Federal, include series and grade) N/A								
	From (MM/YY) To (MM/YY)		Salary	Salary per			Hours per week		
		\$	<u>\$</u>						
	Employer's name ar	nd address					Supervisor's name and phone number		
	N/A						()		
	Describe your duties	s and accomplishments							
	N/A								
2)	Job title (if Federal, i N/A	include series and grade)							
	From (MM/YY)	To (MM/YY)		Salary \$	per		Hours per week		
	Employer's name ar	nd address					Supervisor's name and phone number		
	N/A						()		
		s and accomplishments					<u></u>		
	,								

N/A

9	May we contact your current supervisor?									
	YES NO è If we no	eed to contact you	ır current supervisor	before making an offer,	we will contact you first.					
10				achelor Master						
11	Last high school (HS) or GED school. Give the school's name, city, State, ZIP Code (if known), and year diploma or GED received. N/A									
12	Colleges and universities attended. Do not attach a co									
1)	Name N/A	Total Credits E Semester Qu	<u>-arned</u> uarter	Major(s)	Degree - Year (if any) Received					
	City State ZIP Code	•								
2)										
3)										
GE	NERAL									
14	Are you a U.S. citizen?		Give the country of you							
15	Do you claim veterans' preference? NO 5 points è Attach your DD 214 or other proof.	∕ES	Mark your claim of 5 o 7 è	· 10 points below. lication for 10-Point Veterans' Pi	reference (SF 15) and proof					
16	Were you ever a Federal civilian employee?		required.	Series Grade	From (MM/YY) To (MM/YY)					
10		∕ES	r highest civilian grade	give:						
17	Are you eligible for reinstatement based on career or career-o	conditional Federal s	status?	i						
	NO NO	∕ES	f requested, attach SF	50 proof.						
	PLICANT CERTIFICATION I certify that, to the best of my knowledge and belief, all of the understand that false or fraudulent information on or attached punishable by fine or imprisonment. I understand that any information	to this application n	nay be grounds for not							

SIGNATURE DATE SIGNED